CHAIN-OF-CUSTODY / Analytical Request F

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields m

Mt. Iron, MN 55768 Address: Company: Required Client Information: equested Due Date: WS-003 Thickner Overflow WS-002 Scrubber Make-Up P.O. Box 417 USS Corporation Sample Ids must be unique One Character per box. **SAMPLE ID** (A-Z, 0-9/, -) Fax MATRIX
Drinking Water
water
waste water
Product
Soit/Soild
Oil
Wipe
Air
Other Copy To: Report To: Tom Moe Project Name: Purchase Order #: Required Project Information: ₹ MATRIX CODE (see valid codes to teft) ٤ Audorate SAMPLE TYPE (G=GRAB C=COMP) NPDES-LINE 3 Wkly 33,30 SIR-(1)55,30 SIR-C 57,30 proctist 30 proct START COLLECTED SIGNATURE of SAMPLER: PRINT Name of SAMPLER: DATE 8 11-30-15/14/15 SAMPLE TEMP AT COLLECTION Pace Quote: Address: # OF CONTAINERS Pace Project Manager: Attention: Invoice Information: Company Name: Unpreserved autmuttile and mounted H2SO4 HNO3 Preservatives HÇI heather.zika@pacelabs.com, Na2S2O3 Methanol WIL Analymetrication LAB FILTERED: SO4 DATE Signed: × Lab FILTERED: Ca,Mg,Hard CLIENT: USS CORP 12-30-15 14:15 TEMP in C Residual Chlorine (Y/N) ᄕᇨ Received on 15,15 Ice (Y/N) Custod Sealed Z Cooler (Y/N)

Samples 5 3 2 (Y/N)

ITEM #

WO#: 1259141

Due Date: 01/14/16

Pace Analytical*

Document Name:

Sample Condition Upon Receipt Form

Document No.: F-VM-C-001-Rev.09 Document Revised: 23Feb2015

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Issuing Authority:

Pace Virginia, Minnesota Quality Office

Sample Condition	Client Name:		··	Projec	#
Upon Receipt	USS Corp.			·	18 WO#: 1259141
Courier:	☐Fed Ex ☐UPS	USPS		Client	
	Commercial Pace	Other	~~	·	
Tracking Number:					1259141
Custody Seal on Cooler/Box Present? Yes No Seals Intact? Yes No Optional: Proj. Due Date: Proj. Name:					
Packing Material: Bubble Wrap Bubble Bags None Other: Temp Blank? Yes No					
Thermometer Used: 140792808 Type of Ice: Wet Blue None Samples on ice, cooling process has begun					
Control Town Books D. A. C.					
	e freezing to 6°C Correction Fac	tor: 10.3	<u> </u>		Biological Tissue Frozen? Yes No NA nd Initials of Person Examining Contents: 12 (30(5 K-10)
ر			,		Comments:
Chain of Custody Pre	sent?	Yes	□No	□N/A	1.
Chain of Custody Filled Out?		7 Yes	□No	□N/A	2.
Chain of Custody Relinquished?		Yes	□No	□n/a	3.
Sampler Name and Signature on COC?		Yes	□No	□n/a	4.
Samples Arrived within Hold Time?		Yes	□No	□n/a	5.
Short Hold Time Analysis (<72 hr)?		□Yes	No	□N/A	6.
Rush Turn Around Ti	me Requested?	∐Yes	VNο	□N/A	7.
Sufficient Volume?		Yes	□No	□N/A	8.
Correct Containers Used?		7 Yes	□No	□N/A	9.
-Pace Containers Used?		Yes	□No	N/A	
Containers Intact?		Yes	□No	□N/A	10.
Filtered Volume Received for Dissolved Tests?		Yes	□No	□N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?		Yes	No		12.
-Includes Date/Time/ID/Analysis Matrix: wt			١٠٠٠	CIVA	
See pH log for regults and additional and					
All containers needing acid/base preservation will be checked and documented in the pH logbook.		□Yes	□No	Фи/A	documentation
Headspace in Methyl Mercury Container		Yes	□No	DN/A	13.
Headspace in VOA Vials (>6mm)?		Yes	□No	DN/A	14.
Trip Blank Present?		□Yes	□No	DN/A	15.
Trip Blank Custody Seals Present?		Yes	□No	DN/A	•••
Pace Trip Blank Lot # ((if purchased):			7	
CLIENT NOTIFICATION	I/DECOLUTION				
CLIENT NOTIFICATION/RESOLUTION Person Contacted: Date/Time					
Comments/Resolution:				D	ate/Time:
Commency resolution.					
					
		·			
	, v				
FECAL WAIVER ON FILE Y N . TEMPERATURE WAIVER ON FILE Y N					
1 - 1 - 1					

Project Manager Review:

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)